	Express Mail Label No. (if	applicable)					
	Application No.	10/750,010					
	Confirmation No.	9330					
1	Filing Date	December 31, 2003					
	First Named Inventor	Taglienti					

2143

258807

Shin, Kyung H.

## Request for Continued Examination (RCE) Transmittal

Address to:
Mail Stop RCE
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Group Art Unit

Examiner Name

Attorney Docket No.
Client Reference No.

1.	Submission required under 37 CFR 1.114													
a.   Previously submitted														
		i.		Consider	the am	endment(s)/i	reply under	r 37 CFR	1.116 prev	ious	ly filed c	on		
				(Any unentered amendment(s) referred to above will be entered.)  Consider the arguments in the Appeal Brief or Reply Brief previously filed on										
				Other:										
	b.			losed		•		£	П г г	TO.	1440			
		i.	凶	Amendm					Form P			es listed in For	m PTO-1440	
		ii.		Affidavit(	s)/Decla	ration(s)		٧.		for U.	S. patents	s and applications)	01 F 10-1443	
		iii.		Informati	on Discl	losure Stater	ment (IDS)	vi.	☐ Other:					
2.	Mi	scel	lane											
	a.						c) for a period							
			of	of months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.)										
	b.		App	ilicant clai	ims sma	ill entity statu	us. See 37	' CFR 1.2	?7					
	C.		Oth											
3.	Fe	es -	The	RCE fee	under 3	7 CFR 1.17(	e) is require	ed by 37	CFR 1.114	whe	en the R	CE is filed.		
Ť.	Fees - The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.  a. ☑ Please charge Deposit Account No. 12-1216 in the total amount indicated below.									elow.				
		i.	$\boxtimes$	RCE fee	RCE fee of \$810.00 (large entity) required under 37 CFR 1.17(e)								\$810.00	
		ii.	$\boxtimes$	One-month extension of time fee of \$130.00 (37 CFR 1.136 and 1.17)									\$130.00	
iii. An extension for has already been secured and the fee paid \$ 0.00 is deducted from the total fee due for the total amount of exten						e paid th	erefor of							
						extension	on now							
	requested.													
	iv. Petition for an extension of time (including the period noted above, if checked), as well as for any additional period necessary to render the present submission timely.													
I	Please charge Deposit Account No. 12-1216 for the appropriate petition fee.  v. Suspension of action fee of \$130.00 (37 CFR 1.17(i))						tee.							
								\$ 0.00						
1		vi.												
		vii.		☐ Claim fee										
				CLAIMS		HIGHEST	_					A 1		
			R	REMAINING		NUMBER	EXTRA		ADD'L			ADD'L Claim		
۸		iee	٨.	AFTER		PREVIOUSLY PAID FOR	CLAIMS PRESENT	RATE	CLAIM FEE		RATE	FEE		
CLA TOT		EE	+^	MENDMENT 35	Minus	49	= FRESEIVI	x 26 =	<del>                                     </del>	00	x 52 =	\$0.00		
		NDEN	╤┼╼	2	Minus	5	=	x 110 =	<del> </del>		× 220 =	\$0.00		
IND							AIM	+ 195 =	<b>—</b>		+ 390 =			
-	D I not i keep without of motific or or or motific or						\$940.00							
	<u>h</u>	M	The	Commis	sioner is	: hereby aut								
	b.  The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216.													
	credit any overpayments to Deposit Account No. 12-12-10.													

In re Application of Taglienti Application No. 10/750,010

## REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL (continued)

	SIGNATURE OF APPLICANT, A	TTORNEY OR AGEN	T REQUIRED	
Name (Print/Type)	Dimitry Kapmar	Registration No. (Attorney/Agent)	62,998	
Signature	D.U.Z	Date	November 10, 2008	
Address	Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6731	Рһоле	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)	